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Bib Data Sheet

CONFIRMATION NO. 7711

<b>SERIAL NUMBER</b> 10/037,791	<b>FILING DATE</b> 01/03/2002 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1614	<b>ATTORNEY DOCKET NO.</b> 96700/727
<b>APPLICANTS</b> Stanley M. Crain, Leonia, NJ; Ke-Fei Shen, Flushing, NY;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A CON OF 09/585,517 06/01/2000 PAT 6,362,194 WHICH IS A CON OF 09/094,977 06/16/1998 PAT 6,096,756 WHICH IS A CON OF 08/759,590 12/03/1996 PAT 5,767,125 WHICH IS A CIP OF 08/276,966 07/19/1994 PAT 5,512,578 WHICH IS A CIP OF 08/097,460 07/27/1993 PAT 5,472,943 WHICH IS A CIP OF 07/947,690 09/21/1992 ABN * (*) Data inconsistent with PTO records.				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY**</b> ** 04/05/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <input type="checkbox"/> yes <input checked="" type="checkbox"/> no		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 19
Examiner's Signature <i>[Signature]</i> Initials		<b>INDEPENDENT CLAIMS</b> 2		
<b>ADDRESS:</b> Craig J. Arnold Amster, Rothstein & Ebenstein 90 Park Avenue New York, NY 10016				
<b>TITLE</b> Method of simultaneously enhancing analgesic potency and attenuating dependence liability caused by morphine and other bimodally-acting opioid agonists				
<b>FILING FEE RECEIVED</b> 370	<b>FEES: Authority has been given in Paper</b> No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees	
			<input type="checkbox"/> 1.16 Fees ( Filing )	
			<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	
			<input type="checkbox"/> 1.18 Fees ( Issue )	
			<input type="checkbox"/> Other _____	
			<input type="checkbox"/> Credit	